

TOWN OF LOS GATOS

PARKS & PUBLIC WORKS DEPARTMENT ENGINEERING DIVISION PHONE (408) 399-5771 FAX (408) 399-5763

SERVICE CENTER
41 MILES AVENUE
LOS GATOS, CA, 95030

ENCROACHMENT PERMIT APPLICATION

	Permit No. ENO6-				
Project Address:			A.P.N.:		
Wo	ork Description:				
Loc	cation of Work (if not at address frontage):				
Cos	st of Work in the Public Right-of-Way:				
Esti	imated Date of Completion of Work:				
AD	DITIONAL INFORMATION:				
1.	Property Owner/Applicant (circle one):				
	Name:		E-mail:		
	Address:				
	City:				
	NOTE: The information on the contractor must	be supplied to the E	Ingineering Inspector	prior to the start of construction.	
2.	General Contractor in charge of work at the site:				
	Name:		E-mail:		
	Firm:	Town Business License No:			
	License No.:	Class:	Exp. Date:		
	Address:	Phon	e:	Fax:	
	City:		State:	Zip:	
NO	TICE:				
*	Any questions regarding Encroachment Permits, please call George Garcia, Senior Engineering Inspector at (408) 399-7530 or Chuck Hart, Engineering Inspector, at (408) 395-3430.				
*	All Work in the Public Right-of-Way requires an Encroachment Permit.				
♦	Failure to obtain an Encroachment Permit may result in penalties per Town Code - Chapter 23, Article III, Encroachments.				
FO	R OFFICIAL USE ONLY:				
	Indemnity Agreement Required: Yes No (circle one)	Dat	e Returned:		
	Approved by:		Date:		
SIG	GNATURE OF APPLICANT:				
			Date:		
Prir	nt Name:		Title:		